

SEEC FORM 2

STATE ELECTIONS ENFORCEMENT COMMISSION

Party Committee Registration

Revised January 2016



| | | | | | | |
|---|--|---|---|--|----------------------------|--|
| REGISTRATION TYPE <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Amendment | | 1. COMMITTEE NAME Waterford Green Party Town Committee | | | 2. ACRONYM WGPTC | |
| 3. SUBTYPE OF COMMITTEE <input checked="" type="checkbox"/> Town Committee <input type="checkbox"/> State Central Committee | | | 4. PARTY AFFILIATION <input type="checkbox"/> Republican <input type="checkbox"/> Democrat <input checked="" type="checkbox"/> Other (Specify) <u>Green Party</u> | | | |
| 5. COMMITTEE ADDRESS | | | 6. COMMITTEE EMAIL & WEBSITE | | | |
| Address 9 Farmstead Ln | | | Email Address info@waterfordgreenparty.org | | | |
| City Waterford | | State CT | Zip Code 06385 | Website www.waterfordgreenparty.org | | |
| 7. CHAIRPERSON NAME | | | | | | |
| First Name Joshua | | MI S | Last Name Kelly | | Suffix | |
| 8. CHAIRPERSON RESIDENCE ADDRESS | | | 9. CHAIRPERSON MAILING ADDRESS (If different) | | | |
| Street Address 70 Oswegatchie Rd | | | Address | | | |
| City Waterford | | State CT | Zip Code 06385 | City | State Zip Code | |
| 10. CHAIRPERSON TELEPHONE <i>(Include Area Code)</i> 860 912 7624 | | | 11. CHAIRPERSON EMAIL ADDRESS chair@waterfordgreenparty.org | | | |
| 12. TREASURER NAME | | | | | | |
| First Name Billy | | MI G | Last Name Collins | | Suffix | |
| 13. TREASURER RESIDENCE ADDRESS | | | 14. TREASURER MAILING ADDRESS (If different) | | | |
| Street Address 9 Farmstead Ln | | | Address | | | |
| City Waterford | | State CT | Zip Code 06385 | City | State Zip Code | |
| 15. TREASURER TELEPHONE <i>(Include Area Code)</i> 860 287 3022 | | | 16. TREASURER EMAIL ADDRESS billygenecollins@gmail.com | | | |
| 17. DEPUTY TREASURER NAME | | | | | | |
| First Name Baird | | MI L | Last Name Welch-Collins | | Suffix | |
| 18. DEPUTY TREASURER RESIDENCE ADDRESS | | | 19. DEPUTY TREASURER MAILING ADDRESS (If different) | | | |
| Street Address 9 Farmstead Ln | | | Address | | | |
| City Waterford | | State CT | Zip Code 06385 | City | State Zip Code | |
| 20. DEPUTY TREASURER TELEPHONE <i>(Include Area Code)</i> 860 287 5609 | | | 21. DEPUTY TREASURER EMAIL ADDRESS bairdwelchcollins@gmail.com | | | |

Making a false statement on this form may subject you to criminal penalties, including but not limited to, imprisonment for up to one year or a fine of up to two thousand dollars, or both.

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| REGISTRATION TYPE | | COMMITTEE NAME | | | |
|---|-------|---|---|-------|----------|
| <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Amendment | | Waterford Green Party Town Committee | | | |
| 22. ALTERNATE DEPUTY TREASURER NAME <i>(State Central Committees ONLY)</i> | | | | | |
| First Name | | MI | Last Name | | Suffix |
| 23. ALTERNATE DEPUTY TREASURER RESIDENCE ADDRESS | | | 24. ALTERNATE DEPUTY TREASURER MAILING ADDRESS <i>(If different)</i> | | |
| Street Address | | | Address | | |
| City | State | Zip Code | City | State | Zip Code |
| 25. ALTERNATE DEPUTY TREASURER TELEPHONE <i>(Include Area Code)</i> | | 26. ALTERNATE DEPUTY TREASURER EMAIL ADDRESS | | | |
| 27. DEPOSITORY INSTITUTION NAME | | | | | |
| Chelsea Groton Bank | | | | | |
| 28. DEPOSITORY INSTITUTION ADDRESS | | | | | |
| Address 157 Boston Post Road, Waterford, CT 06385 | | | | | |
| 29. CERTIFICATION | | | | | |
| Chairperson | | | | | |
| <p>I hereby certify and state, under penalties of false statement, that all of the designations set forth in this party committee registration statement are true and accurate to the best of my knowledge and belief, and further, that this statement includes my certification to the fact that any individual designated herein to serve as the treasurer or deputy treasurer have indicated to me their acceptance of my appointment to such position.</p> | | | | | |
| Joshua S Kelly | | | 05/22/2017 | | |
| CHAIRPERSON SIGNATURE | | | DATE (mm/dd/yyyy) | | |
| Treasurer | | | | | |
| <p>I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the chairperson to serve as the designated Treasurer of this party committee. I certify that I am an elector in the State of Connecticut. I intend to comply with all the campaign finance registration and disclosure requirements as contained in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.</p> <p>I certify that I have paid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.</p> <p>I certify that I have not been convicted of or pled guilty or nolo contendere to, in a court of competent jurisdiction, any (A) felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense under Title 9 of the General Statutes, or that at least eight years have elapsed from the date of the conviction or plea or the completion of any sentence, whichever date is later, without a subsequent conviction of or plea to another such felony or offense.</p> <p>I certify that I am not otherwise barred from serving as a treasurer by order of the State Elections Enforcement Commission.</p> | | | | | |
| Billy G Collins | | | 05/22/2017 | | |
| TREASURER SIGNATURE | | | DATE (mm/dd/yyyy) | | |

